Approved for use through 07/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office. U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION **TRANSMITTAL**

31132.222 Attorney Docket No. Joe W. Ferguson First Inventor Technique and Instrumentation for Title Intervertebral Prosthesis Implantation EV333436715US Express Mail Label No.

(Only for new nonprovisional applications under 37 CFR 1.53(b))

	APPLICATION ELEMENTS pter 600 concerning utility patent application contents.	ADDRESS TO: Commission P.O. Box 1	Patent Application oner for Patents 450 IVA 22313-1450				
(Submit an Applicant See 37 Cl 3. Specificat (preferred a Description Cross Re Statemen Reference or a composition of the Submitted Subm	tion [Total Pages/] arrangement set forth below) ve title of the invention seference to Related Applications nt Regarding Fed sponsored R & D se to sequence listing, a table, puter program listing appendix und of the Invention nmary of the Invention scription of the Drawings (if filed) Description of the Disclosure	ii. Paper c. Statements verifying ACCOMPANYING AP	ndix) Sequence Submission Form (CRF) nce Listing on: D-R (2 copies); or				
5. Oath or Declara	s) (35 U.S.C. 113) [Total Sheets] ation [Total Sheets] v executed (original or copy)	10. 37 CFR 3.73(b) Stateme (when there is an assign English Translation Doct Information Disclosure Statement (IDS)/PTO-14	dee) Attorney Sument (if applicable) Copies of IDS				
	from a prior application (37 CFR 1.63(d)) ontinuation/divisional with Box 18 completed)	13. Preliminary Amendment 14. Return Receipt Postcard	(MPEP 503)				
Sigr nan 1.63	ELETION OF INVENTOR(S) ned statement attached deleting inventor(s) me in the prior application, see 37 CFR (3(d)(2) and 1.33(b). tion Data Sheet. See 37 CFR 1.76	(Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. Other: Express Mail Certificate Check for \$842.00					
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:							
Continuation Divisional Continuation-in-part (CIP) of prior application No.:							
Prior application information: Examiner							
19. CORRESPONDENCE ADDRESS							
Customer	Number: 000027683	OR Corres	spondence address below				
Name Da	ame David M. O'Dell						
IAddress ⊢—	Address Haynes and Boone, LLP						
;	21 Main Street, Suite 3100 State Texas Zip Code 75202						
Country US		elephone	75202 Fax 214-200-0853				
Name (Print/Type) David M. O'Dell Registration No. (Attorney/Agent) 42,044							
Signature	1 World	<u> </u>	Date March 12, 2004				

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/17 (10-03)
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FEE TRANSMITTAL			Complete if Known					
I LE INAMONIII IA		Application Number						
for FY 2004		Filing Date						
Effective 10/01/2003. Patent fees are subject to annual revision	,	First I	Named I	nventor	Joe W.	Ferguson		
Applicant claims small entity status. See 37 CFR 1.27	<u>. </u>	Exam	iner Nar	me				
		Art Uı	nit		<u> </u>			
TOTAL AMOUNT OF PAYMENT (\$) 842.00		Attorney Docket No. 31132.222				<i></i>		
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)						
Check Credit card Money Order Other None		3. ADDITIONAL FEES Large Entity Small Entity						
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Name The Director is authorized to: (check all that apply)	1053		i .		English spe			
Charge fee(s) indicated below Credit any overpayments		2 2,520	i '		- '		te reexamination	
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1. BASIC-FILING FEE	1252	2 420	2252	210 Ext	ension for re	eply within se	cond month	
Large Entity Small Entity	1253	950	2253	475 Ext	ension for re	eply within thi	ird month	
Fee Fee Fee Fee Description Fee Paid Code (\$)	1254	1,480	2254	740 Ext	ension for re	eply within for	urth month	
1001 770 • 2001 385 Utility filing fee 770.00	1255	5 2,010	2255	1,005 Exte	ension for re	eply within fift	th month	
1002 340 2002 170 Design filing fee	1401	330	2401	165 Not	ce of Appe	al		
1003 530 2003 265 Plant filing fee	1402	330	2402	165 Filir	g a brief in	support of ar	n appeal	
1004 770 2004 385 Reissue filing fee	1403	3 290	2403	145 Req	uest for ora	l hearing		
1005 160 2005 80 Provisional filing fee	1451	1,510	1451 1	1,510 Peti	tion to instit	ute a public u	use proceeding	
SUBTOTAL (1) (\$) 770.00	1452	2 110	2452	55 Peti	tion to reviv	e - unavoidal	ble	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1453	3 1,330	2453	665 Pet	tion to reviv	e - unintentio	onal	
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Extra Claims below Fee Paid Total Claims 24 -20** = 4 x 18 = 72.00			2502		ign issue fe			
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Claims 5 - 3 - 6 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7	1460		1460	130 Pet	itions to the	Commission	ner	<u> </u>
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Large Entity Small Entity Fee Fee Fee Fee Fee Description	1806	180	1806				isclosure Stmt	
Code (\$) Code (\$) 1202 18 2202 9 Claims in excess of 20	8021	l 40	8021	40 Rec	ording each erty (times	n patent assig number of p	roperties)	
1201 86 2201 43 Independent claims in excess of 3	1809	770	2809		g a submis CFR 1.129	sion after fina	al rejection	
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385 For	each additi	onal invention		
1204 86 2204 43 ** Reissue independent claims over original patent	180	1 770	2801			CFR 1.129(b) ontinued Exa	mination (RCE)	
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802		1802	900 Re	-	xpedited exa	, ,	
[Othe	Other fee (specify)						
SUBTOTAL (2) (\$) 72.00 **or number previously paid, if greater; For Reissues, see above	*Red	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0.00						
SUBMITTED BY (Complete (if applicable))								
Name (Print/Type) David M. O'Dell		Registra (Attorney)		42,044		Telephone	972 739-8635	
Signature // /////////////////////////////////	•					Date	March 12, 200	4
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This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:	§	Attorney Docket No. 31132.222		
Ferguson et al	§	PC1021.00		
	§	Customer No. 27683		
Serial No. Unknown	§			
	§	Group Art Unit: Unknown		
Filed: Herewith	§			
	§	Examiner: Unknown		
For: Technique and Instrumentation for	§			
Intervertebral Prosthesis Implantation	§			

EXPRESS MAIL CERTIFICATE

Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

I hereby certify that the following attached papers and fee:

- 1. Utility Patent Application Transmittal Form and Fee Transmittal Form (in duplicate);
- 2. Patent Application consisting of 15 pages of specification, 24 claims and 1 page Abstract of Disclosure;
- 3. Four (4) drawing sheets;
- 4. Application Data Sheet;
- 5. Executed Power of Attorney;
- 6. Check in the amount of \$842.00 for the filing fee;
- 7. Express Mail Certificate; and
- 8. Return Postcard

are being deposited with United States Postal Service "Express Mail Post Office to Addressee" via **Express Mail Number: EV333436715US** to the Commissioner for Patents, Box Patent Application, Alexandria, VA. 22313-1450, on the **12**th day of March, 2004.

Gayle Conner
Typed or Printed Name
Signature